

Employer Report—Part A

The Labor-Management Reporting
and Disclosure Act of 1959, As Amended (LMRDA)

U.S. Department of Labor



Office of Labor-Management Standards
Washington, D.C. 20210
(Rev. 1986)

Form approved - OMB No. 1215-0188
Expires 11-30-99

This report is mandatory under P.L. 86-257,
as amended. Failure to comply may result in
criminal prosecution, fines and civil penalties
as provided by 29 U.S.C. 439, 440.

File two copies

Refer to instructions on page 3

File No. E- 4238

(To be assigned by U.S. Dept. of Labor)

1. Full Name of Reporting Employer (including trade name, if any) and mailing address (Street Number, City, State, ZIP Code).

SHPT
400 Centre Street
Newton, MA 02458

2. Address of Principal Office, if different from address in Item 1.

n/a

3. Any other address or addresses at which records necessary to verify this report will be available for examination.

n/a

6. Type of organization.

☐ Corporation ☐ Partnership ☐ Individual ☐ Other (Specify)

7. Industrial Classification (Check appropriate box(es)):

Manufacturing A <input type="checkbox"/>	Mining B <input type="checkbox"/>	Construction C <input type="checkbox"/>	Transportation D <input type="checkbox"/>	Communication and Utilities E <input type="checkbox"/>	Wholesale and Retail Trade F <input type="checkbox"/>	Finance, Insurance and Real Estate G <input checked="" type="checkbox"/>	Services H <input type="checkbox"/>	Other (Specify) I <input type="checkbox"/>
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8. READ CAREFULLY THE FOLLOWING QUESTIONS, TAKING INTO CONSIDERATION THE EXCLUSIONS LISTED FOR ITEMS 8A THROUGH 8F OF THE INSTRUCTIONS (SEE PAGE 3). IF YOUR ANSWER TO ANY OF THE QUESTIONS IS "YES," CHECK THE BOX IMMEDIATELY FOLLOWING THE QUESTION AND COMPLETE PART B, A COPY OF WHICH APPEARS ON THE REVERSE SIDE. COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER TO ANY OF THE QUESTIONS NUMBERED 8A THROUGH 8F. IF THE ANSWER IS "YES" TO MORE THAN ONE PART OF THE SINGLE QUESTION OR FOR MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER TO THAT QUESTION.

- A. QUESTION.—During the past fiscal year did you make or promise or agree to make, directly or indirectly, any payment or loan of money or other thing of value (including reimbursed expenses) to any labor organization or to any officer, agent, shop steward, or other representative or employee of any labor organization?

☒ No ☐ Yes. If "Yes," enter the number of Part B's required for this question

- B. QUESTION.—During the past fiscal year did you make, directly or indirectly, any payment (including reimbursed expenses) to any of your employees, or to any group or committee of your employees, for the purpose of causing them to persuade other employees to exercise or not to exercise, or as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing without previously or at the same time disclosing such payment to all such other employees?

☒ No ☐ Yes. If "Yes," enter the number of Part B's required for this question

- C. QUESTION.—During the past fiscal year did you make any expenditures where an object thereof, directly or indirectly, was to interfere with, restrain, or coerce employees in the right to organize and bargain collectively through representatives of their own choosing?

☒ No ☐ Yes. If "Yes," enter the number of Part B's required for this question

- D. QUESTION.—During the past fiscal year did you make any expenditure where an object thereof, directly or indirectly, was to obtain information concerning the activities of employees or of a labor organization in connection with a labor dispute in which you were involved?

☒ No ☐ Yes. If "Yes," enter the number of Part B's required for this question

- E. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor relations consultant or other independent contractor or organization pursuant to which such person undertook activities where an object thereof, directly or indirectly, was to persuade employees to exercise or not to exercise, or as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing; or did you make any payment (including reimbursed expenses) pursuant to such an agreement or arrangement?

☐ No ☒ Yes. If "Yes," enter the number of Part B's required for this question

- F. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor relations consultant or other independent contractor or organization pursuant to which such person undertook activities where an object thereof, directly or indirectly, was to furnish you with information concerning activities of employees or of a labor organization in connection with a labor dispute in which you were involved; or did you make any payment pursuant to such agreement or arrangement?

☒ No ☐ Yes. If "Yes," enter the number of Part B's required for this question

TOTAL NUMBER OF PART B'S REQUIRED FOR THIS REPORT IS



Name and Address of Reporting Employer

File No.

E-

(To be assigned by U.S. Dept. of Labor)

SHPT
400 Centre Street
Newton, MA 02157



Refer to Instructions on Page 3

8 e Indicate in blocks at left, question number to which this Part B relates and the consecutive number of this Part B with respect to that question. (See example on page 2, 3d paragraph under "What Must Be Filed.")

9. PROVIDE THE FOLLOWING INFORMATION:

☐ Agreement ☒ Payment ☐ Both.

a. Name and address of person, committee, group or organization with whom or through whom a separate agreement was made or to whom payments or expenditures were made.

b. Position in labor organization or with employer (if an independent labor consultant, so state).

c. Name and address of firm or labor organization with whom employed or affiliated.

Professional Labor Relations Services, Inc.
1038 Redwood Hwy
Mill Valley, CA 94941

ILC

(See col. a)

10. Date of the promise, agreement or arrangement pursuant to which payments or expenditures were agreed to or made.

06 22 00
Mo. Day Yr.

☐ Oral ☐ Written

11. a. Date of each payment or expenditure	b. Amount of each payment or expenditure	c. Kind of each payment or expenditure (Specify whether payment or loan, and whether in cash or property)
(1) 26 JUL 00	(1) 65,725.67	(1) cash pymt
08 AUG 00	92,371.41	" "
15 AUG 00	45,850.80	" "
(2) 18 AUG 00	(2) 45,008.49	(2) " "
24 AUG 00	86,430.89	" "
27 SEP 00	104,696.97	" "
(3) Totl fees/exps	440,084.23	(3) " "

12. Explain fully the circumstances of all payments, including the terms of any oral agreement or understanding pursuant to which they were made. Attach any additional narrative sheets that are necessary to fully explain the required information.

Management consulting, organization development & persuader services provided on as-needed basis to protect workers' & resident rights @ \$150/hr plus expenses.

SIGNATURE AND VERIFICATION

The above employer and each of his undersigned duly authorized officers, declares, under the applicable penalties of law, that all of the information in this report, including all documents referred to therein and attached hereto, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

SIGNED David J. Hegarty PRESIDENT
At Newton, MA On 3/15/01
City State Date (If other title, cross out and write in correct title above.)

SIGNED Maureen Hughes TREASURER
At Newton, MA On 3/15/01
City State Date (If other title, cross out and write in correct title above.)

NOTE.—Only one Part B of an LM-10 report need be signed and verified since the Part B so executed will be deemed to cover and include all Part B's filed with the report.